

Article - Health - General

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§18-9A-02.

(a) On or before June 1, 2021, the Department, in collaboration with local health departments in the State and the Maryland State Department of Education, shall adopt and implement a 2-year plan to respond to the outbreak of COVID-19.

(b) The plan required under this section shall:

(1) Include measures to enhance public health efforts at the State and local level to monitor, prevent, and mitigate the spread of COVID-19;

(2) (i) Assess the COVID-19 public and private testing infrastructure in place both statewide and in each local jurisdiction;

(ii) Identify and address the unmet needs for COVID-19 testing statewide and in each local jurisdiction, including the number and location of public and private testing providers required to ensure access to testing on demand for all residents of the State;

(iii) Establish specific monthly goals for COVID-19 testing statewide and in each local jurisdiction to ensure access to testing for all residents of the State, including:

1. A goal to achieve the capacity to perform the surveillance testing required to safely reopen and keep open schools, institutions of higher education, workplaces, and other community facilities in the State while minimizing the community spread of COVID-19 in calendar years 2021 and 2022 through a network of public and private testing providers; and

2. For each local jurisdiction, a goal to establish the required number of public or private COVID-19 testing locations to achieve the surveillance testing goal described in item 1 of this item; and

(iv) Estimate the funding required to implement the surveillance testing goal described in item (iii)1 of this item and the extent to which federal funding already received by the State in fiscal year 2021 and federal funding that is provided to the State and received after March 1, 2021, can be used to cover the cost required to achieve that goal;

(3) (i) Assess the contact tracing infrastructure in place for COVID-19 both statewide and in each local jurisdiction;

(ii) Determine the optimal number of contact tracing, case management, care resource coordination, and other personnel per 100,000 residents needed in each jurisdiction to effectively monitor, prevent, and mitigate the spread of COVID-19;

(iii) Identify and address the unmet needs for COVID-19 contact tracing and related outbreak prevention and mitigation efforts both statewide and in each local jurisdiction; and

(iv) 1. Establish goals for identifying, locating, and testing individuals who have been in close contact with individuals who test positive for COVID-19 that are in alignment with Centers for Disease Control and Prevention guidance for effective contact tracing programs; and

2. Include a mechanism for monitoring performance of contact tracing and testing of contacts both statewide and for each local jurisdiction;

(4) Require the Department to assist local jurisdictions that adopt strategies to:

(i) Accelerate access to and the use of at-home collection and point-of-care tests for COVID-19; and

(ii) Incentivize and encourage pharmacies and health care providers, including primary care providers, to provide COVID-19 testing; and

(5) Allow each local jurisdiction to establish and implement a program for COVID-19 contact tracing that is independent from the contact tracing program performed by the State or the entity with whom the State has contracted to perform contact tracing for the State.

(c) The plan required under this section shall have a design that addresses the disproportionate impact of the COVID-19 pandemic on underserved and minority communities in the State.

(d) On or before June 1, 2021, the Department shall submit the plan required under this section to the General Assembly, in accordance with § 2-1257 of the State Government Article.

(e) (1) (i) For fiscal years 2021 and 2022, the Department shall provide \$25,000,000 each year in grants to local jurisdictions to expand capacity for

COVID–19 testing and contact tracing, or for any other public health purpose related to COVID–19 response for which federal funding is authorized.

(ii) Grant funding provided for COVID–19 response under subparagraph (i) of this paragraph shall be divided between local jurisdictions in proportion to their respective populations.

(iii) The Department shall provide additional grant funding to a local jurisdiction to supplement the grant funding allocated to the local jurisdiction under subparagraphs (i) and (ii) of this paragraph if the Department determines that the initial allocation of grant funding is not sufficient to meet the COVID–19 testing and contact tracing needs of the local jurisdiction.

(iv) A local jurisdiction may use grant funding provided under this subsection to expand COVID–19 testing capacity through direct testing efforts by the health department of the local jurisdiction or by contracting with other entities to provide testing.

(2) (i) For fiscal years 2021 and 2022 and in addition to any funding provided under paragraph (1) of this subsection, the Department shall provide funding to local jurisdictions that elect to establish and implement a program for COVID–19 contact tracing that is independent from the contact tracing program performed by the State or the entity with whom the State has contracted to perform contact tracing for the State.

(ii) The amount of funding provided to a local jurisdiction for COVID–19 contact tracing under subparagraph (i) of this paragraph shall be equivalent to the cost per case amount provided to the entity with whom the State has contracted to perform contact tracing for the State.

(3) (i) For fiscal years 2021 and 2022, the Department shall provide \$15,000,000 each year in grants to local jurisdictions to vaccinate residents of the local jurisdiction against COVID–19.

(ii) Grant funding provided for COVID–19 vaccination under this subsection shall be divided between local jurisdictions in proportion to their respective populations.

(iii) The Department shall provide additional grant funding to a local jurisdiction to supplement the grant funding allocated to the local jurisdiction under subparagraphs (i) and (ii) of this paragraph if the Department determines that the initial allocation of grant funding is not sufficient to meet the COVID–19 vaccination needs of the local jurisdiction.

(4) The Department may use only federal funding allocated to the State under the Coronavirus Response and Relief Supplemental Appropriations Act and any other federal legislation enacted in calendar years 2020 through 2022 to provide funding required under this section.

(f) (1) To the extent practicable, the Department shall provide up to \$9,000,000 in fiscal year 2021 and \$36,000,000 in fiscal year 2022 in grant funding to assisted living programs and home health agencies in calendar year 2021 to cover the cost of COVID–19 testing for residents, patients, and staff.

(2) The Department may use only federal funding allocated to the State under the Coronavirus Response and Relief Supplemental Appropriations Act and any other federal legislation enacted in calendar years 2020 through 2022 to provide funding required under this subsection.

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